

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET						SERIAL NO. 10/6000X	FILING DATE
						APPLICANT(S)	
						CLAIMS	
AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT			
	IND	IND	DEP	IND	DEP	IND	DEP
1	/					51	
2						52	
3		6				53	
4			1			54	
5	/					55	
6						56	
7			1			57	
8						58	
9			1			59	
10						60	
11			1			61	
12						62	
13			1			63	
14						64	
15			1			65	
16						66	
17						67	
18						68	
19						69	
20						70	
21						71	
22						72	
23						73	
24						74	
25						75	
26						76	
27						77	
28						78	
29						79	
30						80	
31						81	
32						82	
33						83	
34						84	
35						85	
36						86	
37						87	
38						88	
39						89	
40						90	
41						91	
42						92	
43						93	
44						94	
45						95	
46						96	
47						97	
48						98	
49						99	
50						100	
TOTAL IND.	2		1			TOTAL IND.	
TOTAL DEP.	4		2			TOTAL DEP.	
TOTAL CLAIMS	6		160			TOTAL CLAIMS	